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2.5 5

Threat Heart Insert Priority Information (if appropriate)

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

ATTORNEY	DOCKET	NO.

As a below named inventor, I hereby declare that: my residence post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole n

entitled: *	-	d for which a patent is sough	t on the in	nventio
Extracorporeal blo	od treatment s	ystem		
☐ The Specification Serial No was filed as PCT i	was filed on and was amenon ternational application	ess one of the following boxes and was ded on number er PCT Article 19 on	assigned on	ed:
(if applicable). I hereby state that I h specification, including the content of	ave reviewed and un claims, as amended by	derstand the contents of the any amendment referred to a	above id ibove.	entifie
I acknowledge the duty Code of Federal Regulation		n material to patentability as d	efined in T	Title 37
that the same was not in pub prior to this application, the inventor's certificate issued by States of America on an app twelve months (six months for inventor's certificate on the of America prior to this applant I hereby claim foreign p	blic use or on sale in the nat the invention has before the date of this ablication filed by me of or designs) prior to this invention has been ication by me or my leriority benefits under	or more than one year prior to be United States of America me not been patented or made application in any country force or my legal representatives or a sapplication, and that no apple filed in any country foreign to gal representatives or assigns, Title 35, United States Code, & listed below:	ore than of the subjec- eign to the assigns mo- ication for the United except as f	one yea ct of an United ore than r paten d States follows
application(s) for patent or Prior Foreign Application(s)	inventor's certificate	isted below.	Priority	Claime
100 49 393.9	Germany	October 5, 2000	X	
(Number)	(Country)	(Month, Day Year Filed)	₩8s	No
(Number)	(Country)	(Month, Day, Year Filed)	Yes	No
(Number)	(Country)	(Month/Dav, Year Filed)	Yes	□ No
(Number)	(Country)	(Month/Day/Year Filed)	□ Yes	□ No
(Number)	(Country)	(Month/Day/Year Filed)	□ Yes	□ No
All Foreign Applications, i	f any, for any Patent	or Inventor's Certificate Fileding Date of This Application:	d More T	han 12
Country	Application	•		y/Year)
				d State

(Application Serial No.)	(Filing Date)	(Status - patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status — patented, pending, abandoned)

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Vincent L. Ramik - Registration No. 20,663

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Send Correspondence to: DILLER, RAMIK & WIGHT, P.C.

Merrion Square Suite 101 7345 McWhorter Place Annandale, Virginia 22003 Telephone (703) 642-5705

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by

			ction 1001 of little 18 (
***		tatements may jeopa	rdize the validity of th	e application or	any patent issued
1.01	thereon.				
Full Name of First or Sole Inventor:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		'DATE
Insert Name of Inventor Insert Date This Document Is Signed	Friedrich	Mueller			
Insert Résidence Insert Citizenship	RESIDENCE (City State & C	ountry)		CITIZENSHIP	
127		berg, Germany			
Insert Post Office Address	POST OFFICE ADDRESS (Complete Street Address including City State & Country)				
jepis Jepis	Forsthausst:	rasse 30, 3579	2 Loehnberg, Ge	rmany	
Full Nathe of Second Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE
see above	Sándor	Dolgos			
	RESIDENCE (City State & C	ountry)		CITIZENSHIP	
	2000 Szenter	ndre, Hungary			
	POST OFFICE ADDRESS	(Complete Street And Issue (Judina)	State & Country)		
	Szélkerék u. 15., 2000 Szentendre, Hungary				
Full Name of Third	of Third GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE				'DATE
Inventor, If any: see above	Péter	Szamkó			
	RESIDENCE (City State & C	ountry)		CITIZENSHIP	
	2131 Goed, Hungary				
	POST OFFICE ADDRESS	POST OFFICE ADDRESS (Complete Street Address including Cit. State & Country)			
	Arany János u.7., 2131 Goed, Hungary				
Full Name of Fourth Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR S SIGNATURE		DATE
see above					
	RESIDENCE (City State & C	our n.)		CITIZENSHIP	
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Full Name of Fifth Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE
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- date this document is	his document is				
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